

NASA Invitational Travel Form

NOTE: This information will remain confidential and will ONLY be used for the purpose of travel preparation and reimbursement. Travel reimbursements are processed via direct deposit. Please supply all the information below.

U.S. Citizen? ☐ Yes ☐ No

Legal Name: _____

First Name

M.I.

Last Name

Government Contractor? ☐ Yes ☐ No

SSN: _____ - _____ - _____ **DOB:** ____ / ____ / ____

Month Day Year

Place of Birth: _____ / _____

Country

State

Drivers License:

State: _____ Number: _____

Residential Address:

Street Address: _____

City: _____ State: _____ Zip Code: _____

Contact Information:

Phone: (____) _____ Email: _____

Travel Authorization / Billing:

Credit Card # _____

Travel Reimbursement Information (*processed via direct deposit*):

Bank Name: _____

Bank Routing Number: _____

Bank Account Number: _____

Account Type: ☐ Checking ☐ Savings

Do you plan on returning as an Invitational Traveler to NASA?

☐ Yes ☐ No